24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
NRCC	C C00075820
Check if 24-hour report 48-hour report Ne	ew report Amends report filed on Amends report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
NEBO MEDIA	11 01 2022
Mailing Address PO BOX 9825	Amount
City State	Zip Code 697282.04
ARLINGTON VA	22219 Transaction ID : SE24-0.140084 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA	Category/ Type 10 28 2022
Name of Federal Candidate	Support Office Sought: ** House District:08
SCHRIER, KIM, , ,	▼ Oppose President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2343099.50
5 11 11 12 13	Other (specify) ▶
Full Name of Payee NEBO MEDIA	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 9825	Amount
City State	Zip Code 15867.24
ARLINGTON VA	22219 Transaction ID : SE24-0.140109 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA	Category/ Type 10 28 2022
Name of Federal Candidate	Support Office Sought: House District: 08
SCHRIER, KIM, , ,	▼ Oppose President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary 2343099.50 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······································
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	Clectronically Filed] Date 11 02 2022
Signature	

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